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Navy & Marine Corps Medical News

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This service distributes news and information to Sailors and Marines, their families, civilian employees, and retired Navy and Marine Corps families. Further dissemination of this email is encouraged.

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Headline: Ships' health programs earn them "H" award

By CAPT David Snyder, USN, Surface Forces Pacific

SAN DIEGO--Throughout the Navy there is increased interest in wellness and health promotion. Recently that interest was underscored by Surface Forces Pacific (SurfPac), with the naming of 1998 Force Commander Annual Wellness Unit Awards. Seventy SURFPAC commands have qualified to paint a green "H" for Health insignia on their bridge wings this year. Impressive, innovative work is going on in wellness and health promotion throughout the Force. These ships represent some innovative ideas that will certainly spread throughout the entire Navy. The following is a sampling of their ideas and programs.

USS Arkansas (CGN 41) now requires that all personnel participate in physical training (PT) three times weekly. Not unusual in itself -- but while underway ARKANSAS regularly comes to a course, speed, and wind direction that facilitates topside running! Talk about command support!

USS Blue Ridge (LCC 19) has established a registry to track back and knee injuries in each workspace. They are looking for trends that will tip them off in time to take early corrective action to prevent on-the-job injuries.

USS California (CGN 36) has an effective sexually transmitted disease (STD) awareness program. The ship noted a marked reduction in STDs - none reported, in fact - during

her recent deployment.

USS Cleveland (LPD 7) dental staff are aggressively counseling dippers, chewers, and smokers on the very real hazards of tobacco use. The ship will provide "mint chew" to Sailors who want to kick the habit.

USS Curtis Wilbur (DDG 54) has a three times weekly physical training program that has resulted in 58% of her crew scoring "outstanding" during the most recent cycle.

USS Curtis (FFG 38) has a "Guest Chef" program that solicits healthy recipes from the crew. The ship also sends her Mess Specialists to executive chef courses at premier hotels.

USS Fletcher (DD 992) has a remedial PT program. Not too unusual, except that Sailors in Fletcher's program are each teamed up with fit and within-standards shipmate mentors who help them stay motivated and on their diets and exercise programs.

These are just a few selections taken from many, many great ideas out there for improving the condition of the "human machinery of the Fleet." Managed care in the Navy is not really just about "managed cost." It is more properly focused upon a proactive, educational approach to health and wellness that, if we do it right, will pay dividends both now and well into the future.

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Headline: Prescription process prevents long waits

By Kimberly Allen Rawlings, Bureau of Medicine and Surgery

WASHINGTON--Long waits are over for customers at the Naval Medical Center, San Diego outpatient pharmacy. Since the new patient oriented dispensing (POD) system was developed, the chore of getting a prescription filled has been reduced by about one third. With the POD system, customers can now get a prescription filled in about nine and a half minutes, compared to the old 30 to 45 minutes.

Each customer is assigned a category, such as active duty or patients from in house physicians, among others. Tickets are given to them based on their category and priority of service.

As patients' numbers are called, they collect the prescription at a window and receive information about how to take it, its potential side effects and warnings about mixing it with other medicines and certain food.

According to LCDR Britt Bayles, MSC, assistant pharmacy department head, the customers are not the only ones who benefit from the re-engineered pharmacy. The POD system has also aided pharmacy accuracy in filling prescriptions, reducing duplication efforts and eliminating filling prescriptions for "no-show" patients.

"We don't fill the prescription unless the patient is standing there," said Bayles. In the past at least 100 prescriptions would have to be returned to stock because of non pick-up on most days."

The POD is far ahead of the old prescription-filling

methods. Then, It was likely that several pharmacy technicians would be responsible for filling one prescription. As multiple prescriptions would come in one tech would label the container and another would fill it while both performing other jobs as well. Today's system frees personnel and expedites the prescription filling process.

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Headline: Corpus Christi improves personnel readiness status  
By: HM2 Sean Wallinger, Naval Hospital, Corpus Christi

CORPUS CHRISTI, Texas--Naval Hospital Corpus Christi (NHCC) is showing the Fleet that as far as personnel readiness is concerned, it is ready to go to war. For April, May and June, it has reported an 86 percent average personnel readiness status to its Health Care Support Office in Jacksonville, Fla.

Now when medical teams at NHCC deploy to the Fleet Marine Forces and other operational platforms, they will be combat ready, with medical, dental and administrative requirements completed and up to date.

The upgrade process began in March when NHCC reviewed its personnel readiness status and decided it needed improvement. A readiness team was created to review the command mobilization program and determine innovative ways to improve readiness status.

One of the first events in the program was a standdown scheduled by Readiness Officer, LT Larry Cummings. That day was dedicated to bringing everyone up to date with vaccination requirements.

Another part of the program required Command Readiness Coordinator, Hospital Corpsman Second Class Tom Maxwell, to combine a data base retrieval program with the existing command mobilization data to ensure personnel readiness status reporting was current. The accurate data base, along with requiring personnel to have readiness status cleared before taking leave, or going on TAD, resulted in readiness reaching a high of 86 percent.

According to Medical Augmentation Program Manager for Health Care Support Office (HSO), Jacksonville, Thomas Payne, this was the highest readiness status reported by a medical treatment facility to HSO Jacksonville's area of responsibility during the months of March, April and May.

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Headline: Historic BUMED buildings saved from fire  
By Earl W. Hicks, Bureau of Medicine and Surgery

WASHINGTON--Alert watch standing by Chief Hospital Corpsman Jim Cassidy produced an intense race to save Bureau of Medicine and Surgery (BUMED) buildings from fire and preventing loss of BUMED's primary communications system.

For his dedication to duty and alert response, Cassidy was awarded his fourth Navy Achievement Medal. And although the 17-year veteran will tell you he was just doing his job,

his response kept BUMED communications in tact and saved several historical buildings from burning.

Cassidy's weekend duty had started in a routine manner. Saturday afternoon he started across the parking lot making his rounds, when he smelled smoke.

"There was no mistaking the odor," said the Westerly, R.I. native. "It wasn't a barbecue."

He continued walking around the compound and spotted smoke coming from the roof gables of Building 4. From that point, his fast response certainly saved Building 4 and its communications equipment and possibly other BUMED structures.

Cassidy called both the fire department and his commanding officer. He then entered the building to determine if anyone was there and to determine how far the fire had spread. Finding no one in the building and not detecting heat in office spaces, he met the fire department, which had arrived within five minutes.

According to Cassidy the fire fighters cut into the roof with chain saws, cut the beams out and flooded the area with water.

After receiving Cassidy's call at home, CAPT Thomas Candelaria, chief of staff and commanding officer, enlisted staff began a hasty trip to BUMED, all the while realizing the potential disaster brewing. Not only could historical buildings possibly be destroyed, Building 4 housed the Information Technology Support Office and all BUMED network servers and the teleconferencing video studio.

"His attention to duty literally saved a priceless piece of property and saved the Navy hundreds of thousands of dollars to replace the communications equipment," Candelaria said.

The fire never spread beyond the roof. Nobody was hurt and no communications equipment was lost.

"It really was a matter of being in the right place at the right time," Cassidy said. "If I had come in earlier, [the fire] would have never been caught. It was that kind of slow smoldering fire."

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Headline: Corpsmen's research prepares Navy for future medical needs

By Doris Ryan, Naval Medical Research and Development Command

BETHESDA, Md.--Two corpsmen at the Naval Medical Research Institute (NMRI) are forward deployed for Navy Medicine in a manner not normally associated with their discipline. Hospital Corpsman Second Class Robert Kampen, a surgical technician and Hospital Corpsman Second Class Sean Scanlon, advanced laboratory technician are involved in research for the medical future, enhancing Navy medical knowledge and therefore contributing to the readiness of Sailors and Marines.

They, along with the few other technicians in Navy

research centers around the globe, are examples of corpsmen working side by side with research scientists to bring new medicine to the working spaces of the 21st century Fleet.

Kampen contributes to the Transplantation Biology Branch of the Immune Cell Biology Program by working in non-related organ transplants. The research team marked a significant milestone in 1997, testing a therapy that seems to prevent rejection of mismatched transplanted organs in non-human primates.

"I work with tissue samples from our experimental animals...and then view what is happening within the tissue after the treatment with this anti-rejection therapy," Kampen said.

After submitting an abstract describing his work to the American Society of Transplant Surgeons professional committee, he responded to their invitation in May and presented the results of his research at their annual meeting.

Scanlon works in the Bone Marrow Registry Department, typing bone marrow from potential Department of Defense donors and adding their names to a national registry of non-related bone marrow donors. When volunteer donors are really productive, he sometimes types 200 bone marrow samples in a week. Bone marrow transplantation treats suppressed bone marrow production caused by leukemia and other malignancies, radiation, or chemical injury.

He said the experience he had with the fleet before coming to NMRI provided valuable insight into why he is there: "We support the men and women who serve this country by keeping them healthy."

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Headline: TRICARE question and answer

Question: I am currently enrolled in the Uniformed Services Family Health Plan (USFHP). Can I use a military treatment facility for my care?

Answer: USFHP enrollees cannot use military hospitals, clinics or pharmacies without referral by the USFHP health care provider.

The USFHP, formerly known as Public Health Hospitals/Uniformed Services Treatment Facilities, was established by public law to provide care for eligible beneficiaries.

The USFHP offers a managed care program equivalent to the TRICARE Prime program offered through the DoD military medical treatment facilities to non-active duty TRICARE-eligible beneficiaries such as family members and retirees. However, as stated earlier, those enrolling with USFHP will not be allowed to use military treatment facilities or pharmacies unless referred by their USFHP provider. Call your local TRICARE Service Center or military treatment facility to determine if there is a USFHP program in your

area.

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Headline: Healthwatch: Gynecological exams part of preventive health process

WASHINGTON--Most experts agree that if women are sexually active or are over 18 years old they should have a gynecological exam every year. The annual exam is a way for women to take control of their health. Prevention is the key, and that's what a gynecological exam is all about.

During an annual exam, the doctor or other health care professional will perform a number of important tests, like a Pap smear and a clinical breast exam. Many women also go to learn about their birth control options, and about protecting themselves from sexually transmitted diseases (STDs). If you think you are at risk for an STD, a gynecological exam is a good time to be tested and treated if necessary. Some women also go if they think they might be pregnant or are planning a pregnancy.

Not matter how old you are or whether or not you're sexually active, there are some symptoms you can't ignore. If you're concerned about any of these issues, call your doctor or other health care professional and make an appointment.

- Severe pain in the lower abdomen
- Vaginal pain, swelling, itchiness, or discharge
- Breast lumps, breast discharge or changes in breast size
- Severe menstrual cramps or menstrual irregularity
- Blood in the urine
- Pregnancy
- Exposure to an STD

The tests the doctor or other health care professional chooses to perform are based on the woman's age, her medical history and her family's medical history, so every gynecological exam is a bit different. Some tests include breast and pelvic exams. The best bet is to ask which tests you'll be getting and why.

When it is done, the doctor or other health care professional may review the results of each exam and discuss any areas of concern. If a blood test or Pap smear was done, find out when the results will be available and how you will receive them. Prescribed medications should be explained. The name and telephone number of a specialist if required, should be provided

Women should be an active participant in their medical care; ask questions, and make sure you get reports of your test results for your own personal medical file. For more information about this and other women's health concerns, visit the BUMED web page at <http://nmimc-webl.med.navy.mil/bumed/>. Go to the MED-02 section and find "Women's Health."

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Comments about and ideas for MEDNEWS are welcome. Story

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